Fee: \$100.00

City of North Adams Board of Health

Application for Permit to Operate a Tanning Facility (All applications must be filled out completely and legibly)

Name of Fa Address	acility	Tel. #
Name of O	wner(s)	
		Tanning Devices
Device #1	NA 6 4	
	Manufacturer Model #	Serial #
Device #2		
	Manufacturer	Serial #
Device #3		
	Manufacturer	
		Serial #
Device #4		
	Manufacturer	0.11#
		Serial #
Device #5		
	Manufacturer	Covial #
	Model #	Serial #
Device Sup	pplier	Tel. #
Address		
Device Inst Address	aller	Tel. #
Device Ser Address	vice	
	nder the pains and penalt ements of 105 CMR 123.00	ies of perjury, that I have received, read, and understand O Tanning Facilities.
	Signature of Owner	Date Signed

Warning and Consent Form

In accordance with the provisions of 105 CMR 123.000 – Tanning Facilities Section 123.012 (A)(1)

Danger - Ultraviolet Radiation

- 1. Follow Instructions
- Avoid too frequent or lengthy exposure. As with natural sunlight, exposure to a sunlamp may cause eye and skin injury and allergic reaction. Repeated exposure may cause chronic damage characterized by wrinkling, dryness, fragility, bruising of the skin and skin cancer.
- 3. Wear Protective eyewear. FAILURE TO USE PROTECTIVE EYEWEAR MAY RESULT IN SEVERE BURNS OR LONG TERM INJURY TO THE EYES.
- 4. Ultraviolet radiation from sunlamps aggravates the effects of the sun. Do not sunbathe before or after exposure to ultraviolet radiation.
- 5. Abnormal or increased skin sensitivity or burning may be caused by certain foods, cosmetics, or medications, including—but not limited to—tranquilizers, diuretics, antibiotic, high blood pressure medication, birth control pills, and skin creams. Consult a physician before using a sunlamp if you are using medication, have a history of skin problems, or believe you are especially sensitive to sunlight. Pregnant women or women on birth control pills who use a tanning device may develop discolored skin.
- 6. IF YOU DO NOT TAN IN THE SUN YOU WILL NOT TAN FROM THE USE OF THIS DEVICE.
- 7. Use of a tanning device does not provide substantial protective base against the effects of the sun.
- 8. No person aged fourteen to seventeen years, inclusive, will use a tanning device without prior written consent of a parent or guardian. Parent or guardian will state that they have read and understood the provisions of this consent form.
- 9. No person under fourteen years of age will use a tanning device unless accompanied by a parent or guardian. The parent or guardian will sign the consent form for the child.

I have read and understood all the	requirements of this consent form.
Signature:	Date:
The owner or operator of the fac	ility has read this consent form to me. I understand the
requirements of this consent form.	

Record of Customer Tanning Visits

Must be maintained for 12 months after customer's last tanning session.

Customer Name	Telephone #
Address	Signed Warning/Consent? X Yes X No

Date	Time In	Time Out									

Record of Customer Tanning Visits Must be maintained for 12 months after customer's last tanning session.

Customer Name	Telephone #
Address	Signed Warning/Consent? X Yes X No

Date	Time In	Time Out									

Report of Tanning Facility Injury

Tanning FacilityAddress	Telephone #
Customer NameAddress	Telephone #
Health Care ProviderAddress	Telephone #
	escription of Injury
Action and	Treatment Measures Taken
Send Repo	orts within five (5) working days to
Commonwealth of Massachusetts Department of Public Health Division of Community Sanitation 305 South Street Jamaica Plain, MA 02130-3597 Phone: (617) 983-6761 Fax: (617) 524-8062	City of North Adams Board of Health City Hall - Room 209 North Adams, MA 01247 Phone: (413) 662-3020 Fax: (413) 662-3004
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Tanning FacilityAddress	Telephone #
Customer NameAddress	Telephone #
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De	escription of Injury
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Department of Public Health
Division of Community Sanitation
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Jamaica Plain, MA 02130-3597
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City of North Adams Board of Health City Hall - Room 209 North Adams, MA 01247 Phone: (413) 662-3020 Fax: (413) 662-3004

WARNING

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